

UNITED STATES DISTRICT COURT FOR THE DISTRICT OF MONTANA
TRANSCRIPT DESIGNATION AND ORDERING FORM

Please read instructions.

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| 1. NAME Holland & Hart LLP | | 2. PHONE NUMBER (406) 252-2166 | 3. DATE 10/31/2018 | | | | | | | | | |
| 4. MAILING ADDRESS P.O. Box 639 | | 5. E-MAIL ADDRESS bcmcclafferty@hollandhart.com | 6. CITY Billings | 7. STATE MT | | | | | | | | |
| 8. ZIP CODE 59103-0639 | 9. JUDGE Charles C. Lovell | 10. CASE NAME Bear Gulch Solar et al. v. Montana Public Serv. Commission, et al. | | | | | | | | | | |
| 11. U.S. DISTRICT COURT CASE NUMBER 6:18-cv-00006-CCL | | 12. COURT OF APPEALS CASE NUMBER | | | | | | | | | | |
| 13. ORDER FOR <table style="width: 100%; border: none;"> <tr> <td style="width: 25%;"><input type="checkbox"/> APPEAL</td> <td style="width: 25%;"><input type="checkbox"/> CRIMINAL</td> <td style="width: 25%;"><input type="checkbox"/> CRIMINAL JUSTICE ACT</td> <td style="width: 25%;"><input type="checkbox"/> BANKRUPTCY</td> </tr> <tr> <td><input type="checkbox"/> NON-APPEAL</td> <td><input checked="" type="checkbox"/> CIVIL</td> <td><input type="checkbox"/> IN FORMA PAUPERIS</td> <td><input type="checkbox"/> OTHER - Specify</td> </tr> </table> | | | | | <input type="checkbox"/> APPEAL | <input type="checkbox"/> CRIMINAL | <input type="checkbox"/> CRIMINAL JUSTICE ACT | <input type="checkbox"/> BANKRUPTCY | <input type="checkbox"/> NON-APPEAL | <input checked="" type="checkbox"/> CIVIL | <input type="checkbox"/> IN FORMA PAUPERIS | <input type="checkbox"/> OTHER - Specify |
| <input type="checkbox"/> APPEAL | <input type="checkbox"/> CRIMINAL | <input type="checkbox"/> CRIMINAL JUSTICE ACT | <input type="checkbox"/> BANKRUPTCY | | | | | | | | | |
| <input type="checkbox"/> NON-APPEAL | <input checked="" type="checkbox"/> CIVIL | <input type="checkbox"/> IN FORMA PAUPERIS | <input type="checkbox"/> OTHER - Specify | | | | | | | | | |
| 14. TRANSCRIPT REQUESTED - Specify portion(s) and date(s) of proceeding(s) for which transcript is requested. | | | | | | | | | | | | |
| PORTIONS | | DATE(S) | REPORTER | PORTIONS | | | | | | | | |
| Change of Plea | | | | Closing Argument - Plaintiff | | | | | | | | |
| Pre-trial Proceeding | | 10/16/2018 | Tina Brilz | Closing Argument - Defendant | | | | | | | | |
| Voir Dire | | | | Settlement Instructions | | | | | | | | |
| Opening Statement - Plaintiff | | | | Jury Instructions | | | | | | | | |
| Opening Statement - Defendant | | | | Sentencing | | | | | | | | |
| Testimony - Specify Witness | | | | Other - Specify | | | | | | | | |
| 15. ORDER | | | | | | | | | | | | |
| CATEGORY | ORIGINAL Includes certified copy to clerk for records of the Court | FIRST COPY to each party | ADDITIONAL COPIES to same party | FORMAT REQUESTED | | | | | | | | |
| | | | | Paper | Each format is billed as a separate transcript copy. Specify File Format | | | | | | | |
| 30-Day (Ordinary) | \$3.65/page <input type="checkbox"/> | \$.90/ page <input type="checkbox"/> | \$.60 page <input type="checkbox"/> | <input type="checkbox"/> Full Size <input type="checkbox"/> A-Z word index <input checked="" type="checkbox"/> A-Z word index | ASCII PDF <input checked="" type="checkbox"/> | | | | | | | |
| 14-Day | \$4.25/page <input type="checkbox"/> | \$.90/page <input type="checkbox"/> | \$.60/page <input type="checkbox"/> | <input type="checkbox"/> Full Size <input type="checkbox"/> A-Z word index <input checked="" type="checkbox"/> A-Z word index | ASCII PDF <input type="checkbox"/> | | | | | | | |
| 7- Day | \$4.85/ page <input type="checkbox"/> | \$.90/ page <input type="checkbox"/> | \$.60/page <input type="checkbox"/> | <input type="checkbox"/> Full Size <input type="checkbox"/> A-Z word index <input checked="" type="checkbox"/> A-Z word index | ASCII PDF <input type="checkbox"/> | | | | | | | |
| 3- Day | \$5.45/ page <input type="checkbox"/> | \$.105/ page <input type="checkbox"/> | \$.75/page <input type="checkbox"/> | <input type="checkbox"/> Full Size <input type="checkbox"/> A-Z word index <input checked="" type="checkbox"/> A-Z word index | ASCII PDF <input type="checkbox"/> | | | | | | | |
| DAILY | \$6.05/page <input type="checkbox"/> | \$.120/ page <input type="checkbox"/> | \$.90/page <input type="checkbox"/> | <input type="checkbox"/> Full Size <input type="checkbox"/> A-Z word index <input checked="" type="checkbox"/> A-Z word index | ASCII PDF <input type="checkbox"/> | | | | | | | |
| HOURLY | \$7.25/page <input type="checkbox"/> | \$.120/ page <input type="checkbox"/> | \$.90/page <input type="checkbox"/> | <input type="checkbox"/> Full Size <input type="checkbox"/> A-Z word index <input checked="" type="checkbox"/> A-Z word index | ASCII PDF <input type="checkbox"/> | | | | | | | |
| 16. & 17. CERTIFICATE OF SERVICE, DISTRIBUTION and PAYMENT E-file this form with the clerk's office, mail to opposing counsel if they are not electronic filers and serve the court reporter. If payment is authorized under CJA, complete CJA 24 form through box 15 and attach to this order when e-filing. Financial arrangements must be made with the court reporter before transcript is prepared. | | | | | I certify that this form has been served on the court reporter this date: <u>10/31/2018</u> Attorney signature: <u>/s/ Brianne C. McClafferty</u> | | | | | | | |